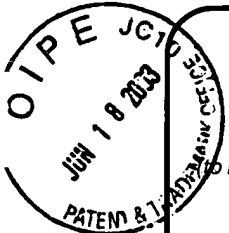


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Please type a plus sign (+) inside this box → ☐



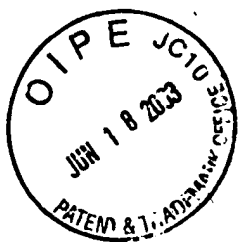
| | | | |
|---|----------------------|------------------------|------------------|
| TRANSMITTAL FORM <i>to be used for all correspondence after initial filing)</i> | Applicati n Number | 09/785,464 | |
| | Filing Date | February 20, 2001 | |
| | First Nam d Inv nt r | Yoshihara et al. | |
| | Group Art Unit | 2823 | |
| | Examiner Name | D.M. Collins | |
| Total Number of Pages in This Submission | 7 | Attorney Docket Number | 4041J-000478/DVA |

| ENCLOSURES (check all that apply) | | |
|--|---|--|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <p style="text-align: center;">Acknowledgement Postcard.</p> |
| Remarks | | <p>The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 08-0750. A duplicate copy of this sheet is enclosed.</p> |
| | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | | |
|--|----------------------------------|---------------|----------------------|
| Firm or Individual name | Harness, Dickey & Pierce, P.L.C. | Attorney Name | Timothy D. MacIntyre |
| Signature | | | |
| Date | June 16, 2003 | | |

| CERTIFICATE OF MAILING/TRANSMISSION | | | |
|---|-------------------|------|---------------|
| I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner of Patents and Trademarks, Washington, D.C. 20231, or facsimile transmitted to the U.S. Patent and Trademark Office on the date indicated below. | | | |
| Typed or printed name | Michelle A. Smith | | |
| Signature | | Date | June 16, 2003 |

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.: 09/785,464
Filing Date: February 20, 2001
Applicant: Yoshihara et al.
Group Art Unit: 2826
Examiner: Alexander O. Williams
Title: Semiconductor Device with Flat Protective
Adhesive Sheet and Method of Manufacturing the
Same
Attorney Docket: 4041J-000478/DVA

13/D
7/12/03
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Director of the United States Patent and Trademark Office
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RESPONSE

Sir:

In response to the Office Action mailed May 1, 2003, please amend the application as follows and consider the remarks set forth below.

Pending Claims begin on page 2 of this paper.

Remarks begin on page 4 of this paper.